



DEPARTMENT OF THE NAVY  
BUREAU OF MEDICINE AND SURGERY  
2300 E STREET NW  
WASHINGTON DC 20372-5300

IN REPLY REFER TO

BUMEDINST 7050.1  
BUMED-31  
20 Apr 93

BUMED INSTRUCTION 7050.1

From: Chief, Bureau of Medicine and Surgery

Subj: MEMORANDA OF UNDERSTANDING, SHARING, AND SUPPORT  
AGREEMENTS

Ref: (a) DoD Instruction 4000.19 of 15 Apr 92 (NOTAL)  
(b) HSETCINST 6000.41 (NOTAL)  
(c) NAVMEDCOMINST 1500.7 (NOTAL)  
(d) Public Law 94-174 (NOTAL)  
(e) Memorandum of Understanding between the Veterans  
Administration and the Department of Defense of  
29 Jul 83 (NOTAL)  
(f) CNO, OP-933D4 Issue Paper of 12 Dec 86 (NOTAL)  
(g) NAVCOMPTMAN volume 3, chapter 2  
(h) Memorandum of Understanding between the Veterans  
Administration and the Department of Defense of  
10 Jun 86 (NOTAL)  
(i) NAVMEDCOMINST 5430.1B  
(j) NAVCOMPTMAN volume 7, chapter 5  
(k) United States Code 1535

Encl: (1) DoD Instruction 4000.19 of 15 Apr 92  
(2) Navy Medical Department Facilities Near DVA Facilities  
(3) Sample Format for General Memoranda of Understanding  
(MOUs)  
(4) ~~Guidelines to Establish Non-Federal Trainee MOUs~~  
(5) Sample DVA 10-1245c, VA/Department of Defense Sharing  
Agreement  
(6) Sample Format for One-Time Transfer of Resources MOUs  
(7) Sample Format for Navy Trainee MOUs (Integral Parts of  
Training)  
(8) Savings Accrued/Costs Incurred Documentation

*Suppl'd by  
BUMED-31  
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1. Purpose. To promote sharing of health care resources and define management responsibilities and procedures for administering memoranda of understanding (MOUs), resource sharing, and support agreements (all referred to herein as agreements).

2. Cancellation. NAVMEDCOMINST 7050.1.

3. Background. An agreement documents mutually agreed to statements of fact, intentions, procedures, and policies concerning future transactions and matters of coordination.



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References (a) through (k) and enclosure (1) establish policy, identify procedures, assign responsibilities, and provide both general and specific guidance to develop and implement various types of agreements. The required format, approval authority, and distribution of these documents may differ significantly.

#### 4. Types of Agreements

a. Defense Regional Interservice Support (DRIS) Agreements. Formal agreements, established per reference (a) and enclosure (1), which document the terms and conditions of recurring support between Department of Defense (DoD) components, within DoD components, or between a DoD component and a non-DoD Federal agency, including interservice, intraservice, and interagency support agreements. DRIS support agreements consolidate or avoid creating duplicate support services by establishing a supplier and receiver relationship which may include the transfer of resources between participants.

b. Research Study MOUs. Formal agreements which document the terms, conditions, and conduct of research studies under the Clinical Investigation Program (CIP), established per reference (b), or under the medical Research, Development, Test and Evaluation (RDT&E) Program, between a Medical Department activity and public or private institutions, other DoD components, or a non-DoD Federal agency. Research study MOUs define the proposed research studies (e.g., projects, tasks, tests, and experiments), assign responsibilities, and document all resource commitments.

c. Navy Trainee MOUs. There are two categories of Navy trainee MOUs. One category is formal agreements, established per reference (c), between a Medical Department activity and a non-Federal institution which specify that Navy trainees participate in clinical learning experiences for an integral part of training at qualified non-Federal institutions. Such MOUs assign responsibilities and document all resource commitments. The second category, Navy trainee full-time outservice training MOUs, are negotiated for BUMED by the Naval Health Sciences Education and Training Command (HSETC) and BUMED legal consultants with civilian universities and hospitals, and Department of Veterans Affairs (DVA) medical centers.

d. Non-Federal Trainee MOUs. Formal agreements between a Medical Department activity and a non-Federal institution which specify that non-Federal trainees participate in clinical learning experiences at the naval activity, assign responsibilities, and document all resource commitments.

e. DVA and DoD Sharing Agreements. Formal agreements authorized by references (d) and (e) which provide for the sharing of specific resources or service (e.g., administrative,

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support, and direct health care services) between local DVA and DoD medical facilities. Reference (f) advised that the DVA General Counsel has determined treatment of DoD dependents may also be authorized in DVA facilities under Title 31, United States Code, 1535. Enclosure (2) provides a listing of Navy and DVA medical facilities located in geographic proximity.

f. One-Time Transfer of Resources MOUs. These are formal agreements which provide for the one-time transfer of functions and resources between major claimants of the Navy and the Marine Corps, as well as other DoD and non-DoD Federal agencies. Resources to be transferred may include funding, manpower, facilities, and equipment.

g. General MOUs. All other formal agreements, not otherwise identified above, which document the terms and conditions of recurring support between a Medical Department activity and a non-Federal public entity (e.g., State, county, or local government), private enterprise, public service organization, or an individual. Agreements with foreign governments or institutions are normally included in this category.

## 5. Policy

a. Consistent with DoD and Department of the Navy (DON) policies, BUMED encourages the development of interservice, intraservice, and interagency support agreements, to improve effectiveness and economy of operations by eliminating duplicate support services, without jeopardizing mission accomplishment.

b. Additionally, BUMED encourages its field activities to develop and participate in the following:

(1) Sharing agreements with the DVA, wherever feasible and appropriate.

(2) CIP MOUs, as determined to be appropriate by HSETC.

(3) Research MOUs, as determined to be appropriate by the Naval Medical Research and Development Command (NAVMEDRSCHDEVCOM) for RDT&E studies.

(4) Non-Federal trainees MOUs, when it is determined that the mission and functions of naval medical and dental treatment facilities (MTFs and DTFs) will be substantially benefited, and the MOUs are with qualified non-Federal institutions.

## 6. Discussion

a. Agreement Reference Table. Table 1 identifies instructions, format, endorsement requirements, and designated approval authorities for the most commonly used types of

agreements defined in paragraph 4. Since Navy trainee MOUs for full-time outservice training are negotiated only by HSETC, they have been excluded from table 1.

b. Documentation Format. Use of formats and forms to document proposed agreements are identified in columns 3 and 4 of table 1 and paragraph 9 of this instruction. Enclosures (3) through (7) provide samples of formats to complete documentation. Specific guidance to complete a prescribed form or format is contained in the applicable program instruction. (See table 1, column 2.) Agreements must document all required elements (e.g., include all services to be provided, specific supplier and receiver responsibilities, all resource commitments, as well as addressing all liability, ownership, and other legal or financial concerns).

(1) DRIS Agreements. Agreements subject to DRIS Program guidelines require the completion and signature of a DD 1144, Support Agreement (see table 1, column 4), as a summary documentation cover-sheet for the support agreement. Enclosure (1) contains general guidance to complete the required form. When a DD 1144 is required, the following must apply:

(a) The supplier normally prepares the DD 1144. But, if the supplier is unable or refuses to prepare the DD 1144, the Medical Department activity must prepare the form.

(b) Consult enclosure (2) of enclosure (1) for guidance in determining reimbursable and nonreimbursable services to be reported on the DD 1144. Exceptions to the guidance must be fully documented for record purposes.

(c) When an agreement causes either party to be both a supplier and receiver (i.e., exchange of services or mutual support), two separate DD 1144's must be executed identifying each party appropriately as "supplier" and as "receiver."

(d) Do not fill in blocks 8-9c(5) of the DD 1144 until approved by the appropriate approval authority for each party (see table 1, column 6).

(e) An attachment of specific provisions must be developed and appended to the DD 1144.

(2) DVA/DoD Sharing Agreements. The VA 10-1245c, VA/DOD Sharing Agreement must be prepared for each separately negotiated agreement. A sample is provided as enclosure (5). The DVA requires that the proposed agreement be signed by both parties before submission for approval. The following information must be documented in blocks 10a and 10b of the form:

(a) Specific services provided by each party (e.g., neurology, radiology, psychiatry, laboratory, surgical, and laundry services), and whether services are provided on an inpatient or outpatient basis, if applicable.

(b) Estimated number of visits, days, treatments, or other measurable quantity anticipated annually.

(c) Reimbursement Rate. VA/DoD sharing agreements must be negotiated locally taking into account local conditions and the actual costs to the providing facility or organization for the specific health care resource provided. Actual costs include communication, utilities, services, supplies, salaries, and related expenses connected with providing health care resources. Excluded from the reimbursement rate are building depreciation and overhead costs incurred at management levels above the medical facility or organization providing the health care resources. While equipment depreciation is not specifically excluded from the costs, facilities are encouraged not to include equipment depreciation in the reimbursement rate due to the nature of funding associated with equipment. Heads of facilities and other organizations may negotiate a reimbursement rate that is less than actual cost to the providing facility or organization to account for local conditions or needs. The reimbursement rate may not be more than the actual cost to the providing facility or organization for the resources provided. Provision of reciprocal service may be considered reimbursement-in-kind, if mutually acceptable to all parties and if the reimbursement to Navy appropriations amounts to less than \$100 as outlined in Navy Comptroller Manual (NAVCOMPTMAN) paragraph 035806. Special reimbursement or billing arrangements should be outlined in block 9 of the individually negotiated VA 10-1245c following reference (g). Reference (h) requires that the current interagency rate be charged for care provided to active duty personnel, not otherwise governed by procedures established in local arrangements.

(3) Other MOUs and Support Agreements. The information requested in enclosure (8) must be developed and provided as additional documentation for all agreements which do not require a DD 1144. Where the requirement for a DD 1144 is questionable due to the nature of the agreement, the approval authority will require a DD 1144 for documentation purposes.

c. Submission Requirements. When submitting proposed agreements for endorsement or approval, the following are required in addition to the prescribed form or format:

(1) A transmittal letter which summarizes the proposal and provides justification for its approval.

(2) Required endorsements.

(3) An unsigned copy of the proposed agreement, except when VA 10-1245c is required.

(4) A DD 1144 where required (see table 1, column 4); otherwise, attach the information requested in enclosure (8).

(5) Other enclosures, as indicated, to aid review of the agreement.

d. Reviews and Renewals

(1) All agreements must be reviewed by both parties when either requests a change in the agreement.

(2) Agreements subject to DRIS Program guidelines and DVA/DoD sharing agreements must be reviewed on a 3-year cycle, unless the term of the agreement is for more than 3 but less than 6 years, in which case a review is required at the midpoint of the period of agreement.

(3) MOUs with foreign governments or instructions must be reviewed at the end of the agreement term, unless conditions stated in paragraph 6d(6) apply.

(4) Non-Federal trainee MOUs may be renewed, without change, except for dates, biennially upon mutual written agreement of all parties, and written approval from BUMED.

(5) All other agreements must be reviewed by BUMED activities annually.

(6) Approval must be obtained, per table 1, for revisions or renewals:

(a) When changes that increase reimbursable costs over \$10,000, or the yearly costs 10 percent above the annual inflation rate.

(b) When proposed changes are inconsistent with current guidance (e.g., requiring reimbursement for services reflected as nonreimbursable in reference (a) or changes in liability or responsibility).

e. Termination. Although effective dates are specified in all agreements, termination clauses must be included as well. Such clauses must stipulate that the agreements can be terminated at the request of either party upon 30 days written notice when directed to the other party and deposited in the United States Postal Service mail. They may also be terminated immediately upon written notice by DoD in the event of war or national emergency.

TABLE 1  
AGREEMENT REFERENCE TABLE

(1) TYPES OF MOU SUPPORT AGREEMENTS	(2) FOLLOW	(3) SAMPLE FORMAT	(4) OTHER REQUIREMENTS	(5) ENDORSEMENTS REQUIRED	(6) APPROVAL/ AUTHORITY	(7) COPY TO
DRIS Support Agreements						
Host/Tenant Agreements (Base Operating Support)	Ref (a)	Encl (1)	Form DD 1144	4/	MED-03	MED-04 3/
Health Care Agreements (Categories "AL"/"BY")	Ref (a)	Encl (1)	Form DD 1144	4/	MED-03	3/
Navy Trainee MOUs (Integral Parts of Training)	Ref (c)	Encl (7)	1/	None	Commanding Officer	4/ 3/
Research Study MOUs	Encl (3)	Encl (3)	1/	4/	NAVMEDRSCHDEVCOM	3/
Non-Federal Trainee MOUs	Encl (4)	Encl (4)	1/ 2/	4/	MED-03	3/
VA/DoD Sharing Agreements	Page 5	Encl (5)	1/	4/	MED-03	3/ 5/
General MOUs	Encl (3)	Encl (3)	1/	4/	MED-03	3/
Except MOUs with Foreign Government or Institutions	Encl (3)	Encl (3)	1/ 2/	4/	MED-03	3/
One-Time Transfer of Resources MOUs	Ltr and Encl (6)	Encl (6)	1/	MED-00 4/	CNO	3/

- 1/ Attach information requested in enclosure (8) to proposed agreement when submitted for approval.
- 2/ Submit proposal for approval before an MOU is negotiated.
- 3/ Healthcare Support Office.
- 4/ Responsible Line Commander.
- 5/ Office of Medical/Dental Affairs.

7. Responsibilities. The timely and effective execution of agreements requires support from command, functional managers, and financial, manpower, and legal specialists. The following responsibilities are assigned to ensure a well-managed MOU, Sharing, and Support Agreement Program within BUMED claimancy.

a. BUMED

(1) Program Manager. Reference (i) designates MED-311 as program manager for MOU, Sharing, and Support Agreements. MED-311 responsibilities:

(a) Coordinate the overall program for Medical Department activities.

(b) Coordinate proposed agreements with cognizant BUMED codes.

(c) Develop and maintain an agreement data base.

(d) Develop program guidance, advisories, and direction for Medical Department activities, to ensure that adequate command attention is applied to meet higher authority taskings and requirements; training needs are coordinated; common problem areas are identified; and all changes to existing DoD and DON policies and procedures are issued and implemented.

(e) Maintain copies of all current approved agreements.

(f) Maintain liaison with cognizant personnel both within and outside of BUMED claimancy (e.g., CNO and DVA) to ensure coordination with other related programs.

(2) Other BUMED Program and Functional Managers. In reviewing agreement submissions, input is frequently required from other program and functional managers within BUMED concerning resource, legal, and related issues. When requested, these managers are responsible for the timely review of proposals to ensure that submissions agree with current DoD, DON, and BUMED policies and procedures.

b. Healthcare Support Office (HLTHCARE SUPPO). All HLTHCARE SUPPOs must designate a coordinator to oversee the execution of their MOU, Sharing, and Support Agreement Program. Coordinator responsibilities:

(1) Provide technical assistance to develop agreements, as requested, and distribute related guidance materials to activities under their cognizance.

(2) Maintain copies of all current approved agreements executed by their command and activities under their cognizance.

(3) Review and update BUMED listings of agreements (see paragraph 7a(1)(d)) as requested, to ensure the accuracy of data in the listing for activities under their cognizance.

c. MTFs and DTFs. Commands must designate a coordinator to oversee the development, analysis, and execution of agreements at the Medical Department activity level. Coordinator responsibilities:

(1) Coordinate the development of proposed agreements with appropriate functional managers within the participating activities, and submit to the appropriate approval authority, per table 1 and this instruction.

(2) Initiate reviews and renewals of all agreements in a timely manner, and forward them for approval, per table 1.

(3) Distribute signed copies of newly approved, revised, or renewed agreements for record purposes, as appropriate. Medical Department activities must provide MED-311 and their cognizant HLTHCARE SUPPO a copy of all such agreements in addition to other distribution requirements.

(4) Implement approved agreements in a timely fashion.

(5) Maintain current files of approved agreements in which the Medical Department activity participates, as well as reference materials prescribed by this instruction and higher authority.

(6) Update the reimbursement information contained in item 7 of the DD 1144 annually for the following fiscal year at the time of the activity's budget submission and forward to BUMED (MED-11) for inclusion in the MED-01 Defense Business Operating Fund-Base Operation Support database.

8. Action. Comply with the policies and procedures in references (a) through (k) and this instruction.

9. Forms

a. DD 1144 (Rev. 3-92), Procurement Coordinated - Support Agreement, S/N 0102-LF-012-8400 is available from the Navy Supply System, and can be ordered per NAVSUP P-2002D.

b. SF 171 (Rev. 2-84), Personnel Qualifications Statement, NSN 7540-00-935-7150; SF 50 (Rev. 1-82), Notification of Personnel Action, NSN 7540-01-109-8812; SF 61 (Rev. 6-87), Appointment Affidavits, NSN 7540-00-634-4015; SF 61B (Rev. 10-81), Declaration of Appointee, NSN 7540-00-935-0999; and SF 1081 (Rev. 4-82), Voucher for Transfers Between Appropriations and/or Funds, NSN 7540-00-634-4234 are available from the Federal Supply System through normal supply procurement procedures.

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c. VA 10-1245c (Rev. 6-92), VA/Department of Defense Sharing Agreement, is available from local DVA MTFs.

  
D. F. HAGEN

Distribution:

All Internal BUMED Codes

SNDL, C28G (BRDENCLINIC)  
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C58R (BRMEDCLINIC)  
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# Department of Defense INSTRUCTION

BUMEDINST 7050.1  
20 Apr 93

April 15, 1992  
NUMBER 4000.19

ASD(P&L)

SUBJECT: Interservice, Interdepartmental, and Interagency Support

References: (a) DoD Directive 4000.19, subject as above,  
October 14, 1980 (canceled)  
(b) Deputy Secretary of Defense Memorandum, "Implementation  
of Regulatory Relief Initiatives," September 30, 1991  
(c) DoD 4000.19-R, "Defense Regional Interservice  
Support (DRIS) Regulation," March 1984, authorized  
by DoD Directive 4000.19, October 14, 1980 (hereby  
canceled)

A. REISSUANCE AND PURPOSE

This Instruction:

1. Reissues reference (a) as a DoD Instruction under the authority  
of reference (b) and replaces reference (c).

2. Provides new Defense Regional Interservice Support (DRIS)  
program policies and procedures for interservice support and cooperation  
between DoD Components and between DoD Components and other Federal  
agencies.

B. APPLICABILITY

This Instruction applies to the Office of the Secretary of Defense,  
the Military Departments, the Chairman of the Joint Chiefs of Staff and  
the Joint Staff, the Unified and Specified Commands, the Defense  
Agencies, and the DoD Field Activities (hereafter referred to collect-  
ively as "the DoD Components"). The term "Military Services," as used  
herein, refers to the Army, the Navy, the Air Force, and the Marine  
Corps.

C. DEFINITIONS

1. DRIS Steering Committee. A committee, chaired by the Assis-  
tant Secretary of Defense (Production and Logistics), or a designated  
representative, and composed of representatives from the Military  
Services and the Defense Logistics Agency (DLA). The committee is  
responsible for facilitating joint Service and Agency communication and  
agreement on Interservice Support Agreement (ISA) policies and Joint  
Interservice Regional Support Group (JIRSG) issues.

Enclosure (1)

2. Interservice Support Agreement (ISA). A formal agreement that defines recurring services to be provided by one supplier to one or more receivers and defines the basis for calculating reimbursement charges for the services.

3. Joint Interservice Regional Support Group (JIRSG). Representatives from DoD installations and activities in a designated geographical region who jointly pursue ways of improving their mission effectiveness, efficiency, and readiness.

4. Memorandum of Agreement (MOA). A document that defines general areas of responsibility and agreement between two or more parties, normally headquarters or major command level components. MOAs that establish responsibilities for providing recurring support should be supplemented with ISAs that specify the services and define the basis for reimbursements.

5. Memorandum of Understanding (MOU). A document that defines areas of mutual understanding between two or more parties, normally headquarters or major command level components. MOUs that identify expectations of recurring support should be supplemented with ISAs that specify the services and define the basis for reimbursement.

#### D. POLICY

DoD Component commanders and directors are encouraged to seek increased economies and effectiveness by participating in local JIRSG initiatives and by cooperating with other DoD Components and Federal Agencies needing support. Interservice support should be provided when recurring interservice support would benefit the DoD and capabilities exist to provide the support without jeopardizing assigned missions. Typically, support agreements are negotiated at the lowest command level practical and documented on a DD Form 1144, "Support Agreement," (enclosure 1).

#### E. RESPONSIBILITIES

1. The Assistant Secretary of Defense (Production and Logistics) shall administer the DRIS program and chair the DRIS Steering Committee.

2. The Secretaries of the Military Departments, the Commanders of the Unified and Specified Commands, and the Directors of the Defense Agencies shall:

a. Ensure that an Interservice Support Coordinator (ISC) is designated at each activity that provides support services to other DoD Components or Federal Agencies.

b. Provide requested support to DoD Components to the extent that capabilities exist, mission assignments permit, and DoD economies would be served.

c. Cooperate with other DoD Components, Federal Agencies and Cooperative Administrative Support Units (CASUs) in exploring the feasibility of improved quality, efficiency, and military readiness through cooperative actions.

d. Provide a representative to the DRIS Steering Committee. Commanders of the Unified and Specified Commands and Directors of Defense Agencies, other than the DLA, are exempt from this responsibility.

F. PROCEDURES

1. Interservice Support Agreements (ISAs). ISAs are prepared by supplying activities in response to requests for recurring interservice support and to supplement MOAs and MOUs that establish recurring support requirements. Each ISA may have only one supplier, but may have more than one receiver for the listed services at the specified reimbursement rate. When a receiver under one agreement also provides support to the supplier, two separate agreements should be prepared. Typically, ISAs are prepared by an Interservice Support Coordinator (ISC) in cooperation with functional managers and using cost data provided by the comptroller. Unresolvable differences between suppliers and receivers should be elevated for resolution through each component's chain of command.

a. A DD Form 1144 (enclosure 1) is typically used to document ISAs. The form identifies the parties to the agreement, term of the agreement, support to be provided, the basis for calculating reimbursements for each category of support (enclosure 2), and an estimate of projected reimbursements. Also, space is provided for documenting both General Provisions (e.g., multiple parties to the agreement, billing instructions, and exceptions to provisions printed on the form) and Specific Provisions (e.g., additional supplier and receiver responsibilities, a listing of occupied facilities, a description of unique conditions, requirements, quality standards, and measurement criteria). Attachments may be added to identify unique requirements and arrangements with each receiver.

b. The basis for reimbursement shall be determined by the supplier's computation of all relevant costs, in accordance with DoD Comptroller policies and procedures promulgated by the DoD Component's headquarters.

c. ISAs, MOAs, and MOUs must be reviewed only when changing conditions or circumstances may require substantial changes or development of a new agreement. Minor changes may be made at any time by correcting the existing document or attaching a memorandum; changes must be initialed by the relevant parties. ISA costs should be reviewed annually to ensure continued accuracy of estimated reimbursement charges.

d. When possible, ISA modifications and terminations should be made bilaterally and with sufficient advance notification to permit appropriate funding adjustments to be made during the budget formulation process. If an ISA must be unilaterally terminated or suspended with

less than 180 days notice to the other parties, the terminating party may be billed by the non-terminating parties for reimbursement of unavoidable termination and re-procurement expenses incurred during the 180 day period following notification.

e. ISAs, MOAs, and MOUs in effect upon issuance of this Instruction shall remain in effect until they expire or until they are terminated in accordance with the terms and conditions in the agreements.

2. Joint Interservice Regional Support Groups (JIRSGs). JIRSGs have been established in designated geographical areas where there are multiple DoD activities (enclosure 3). Each JIRSG consists of representatives from local DoD and Federal activities wanting to participate in discussions that identify opportunities for improved economies and effectiveness.

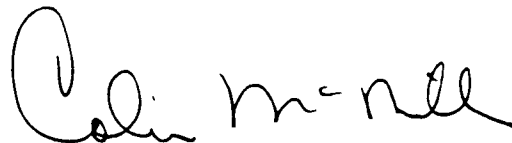
a. Each JIRSG is chaired by a local representative from the Military Service or Agency designated by the DRIS Steering Committee. Typically, JIRSG initiatives are managed by a JIRSG Program Manager provided by the JIRSG chairperson's component.

b. JIRSGs should assist DoD Component commanders and directors in improving mission accomplishment by sharing innovative approaches to solving common problems and by facilitating interservice support and cooperation between regional activities.

c. The authority for JIRSG representatives to make commitments and direct changes resides in each representative's chain of command.

G. EFFECTIVE DATE

This Instruction is effective immediately.



Colin McMillan  
Assistant Secretary of Defense  
(Production and Logistics)

Enclosures - 3

1. DD Form 1144, "Support Agreement"
2. Reimbursement Support Categories
3. Joint Interservice Regional Support Group (JIRSG) Locations

<b>SUPPORT AGREEMENT</b>			
<b>1. AGREEMENT NUMBER</b> <i>(Provided by Supplier)</i>	<b>2. SUPERSEDED AGREEMENT NO.</b> <i>(If this replaces another agreement)</i>	<b>3. EFFECTIVE DATE (YYMMDD)</b>	<b>4. EXPIRATION DATE</b> <i>(May be "Indefinite")</i>
<b>5. SUPPLYING ACTIVITY</b>		<b>6. RECEIVING ACTIVITY</b>	
a. NAME AND ADDRESS		a. NAME AND ADDRESS	
b. MAJOR COMMAND		b. MAJOR COMMAND	
<b>7. SUPPORT PROVIDED BY SUPPLIER</b>			
a. SUPPORT <i>(Specify what, when, where, and how much)</i>		b. BASIS FOR REIMBURSEMENT	c. ESTIMATED REIMBURSEMENT
ADDITIONAL SUPPORT REQUIREMENTS ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO			
<b>8. SUPPLYING COMPONENT</b>		<b>9. RECEIVING COMPONENT</b>	
a. COMPTROLLER SIGNATURE	b. DATE SIGNED	a. COMPTROLLER SIGNATURE	b. DATE SIGNED
c. APPROVING AUTHORITY		c. APPROVING AUTHORITY	
(1) Typed Name		(1) Typed Name	
(2) Organization	(3) Telephone Number	(2) Organization	(3) Telephone Number
(4) Signature	(5) Date Signed	(4) Signature	(5) Date Signed
<b>10. TERMINATION</b> <i>(Complete only when agreement is terminated prior to scheduled expiration date.)</i>			
a. APPROVING AUTHORITY SIGNATURE	b. DATE SIGNED	c. APPROVING AUTHORITY SIGNATURE	d. DATE SIGNED

**11. GENERAL PROVISIONS** (Complete blank spaces and add additional general provisions as appropriate: e.g., exceptions to printed provisions, additional parties to this agreement, billing and reimbursement instructions.)

- a. The receiving components will provide the supplying component projections of requested support. (Significant changes in the receiving component's support requirements should be submitted to the supplying component in a manner that will permit timely modification of resource requirements.)
- b. It is the responsibility of the supplying component to bring any required or requested change in support to the attention of \_\_\_\_\_ prior to changing or cancelling support.
- c. The component providing reimbursable support in this agreement will submit statements of costs to: \_\_\_\_\_
- d. All rates expressing the unit cost of services provided in this agreement are based on current rates which may be subject to change for uncontrollable reasons, such as legislation, DoD directives, and commercial utility rate increases. The receiver will be notified immediately of such rate changes that must be passed through to the support receivers.
- e. This agreement may be cancelled at any time by mutual consent of the parties concerned. This agreement may also be cancelled by either party upon giving at least 180 days written notice to the other party.
- f. In case of mobilization or other emergency, this agreement will remain in force only within supplier's capabilities.

ADDITIONAL GENERAL PROVISIONS ATTACHED: ☐ YES ☐ NO

**12. SPECIFIC PROVISIONS** (As appropriate: e.g., location and size of occupied facilities, unique supplier and receiver responsibilities, conditions, requirements, quality standards, and criteria for measurement/reimbursement of unique requirements.)

ADDITIONAL SPECIFIC PROVISIONS ATTACHED: ☐ YES ☐ NO

## REIMBURSEMENT SUPPORT CATEGORIES

A. MANDATORY REIMBURSEMENT SUPPORT CATEGORIES: Supplying components are permitted to prorate the cost of the following services to all tenants who benefit or have opportunity to benefit from the services. The recommended basis for computing reimbursement for nominal level support is provided within the parenthesis. Where actual costs or a more accurate means of estimating costs are known they should be used. Receivers requiring more than the nominal level of support provided to all tenants must reimburse for the higher level of service received. Charges may not include reimbursement for services not authorized to receive appropriated funds.

1. Chapel and Chaplain Services. Includes pastoral ministries, worship services, religious rites, pastoral visits, spiritual counseling and religious education. (Assigned military personnel)

2. Command Element. Includes command activities necessary to the accomplishment of mandatory reimbursable support services. Also includes installation wide public affairs services and social action counseling services. (Assigned personnel)

3. Common Use Facility Operations, Maintenance, Repair and Construction. Includes operation, maintenance, repair and minor construction or alteration of common use infrastructure, roads, grounds, surfaced areas, structures, real property and installed equipment. Also includes common benefit signs, energy consumption, snow removal and beautification projects. (Assigned personnel)

4. Disaster Preparedness. Includes operation of disaster preparedness programs and related services, equipment, and facility support for emergencies and wartime operations. (Square footage of facilities)

5. Environmental Compliance. Includes administration of programs for the control and disposal of hazardous materials and other forms of pollution. Also includes recycling and resource recovery programs. (Assigned personnel)

6. Fire Protection. Includes fire fighting, protection, and prevention programs. (Square footage of facilities)

7. Libraries. Includes recreational and general reference library services. (Assigned personnel eligible to use the services)

8. Morale and Fitness Support. Includes theaters, parks, recreational centers, gyms, fitness centers, athletic fields, and related services. (Assigned personnel eligible to use the services)

9. Police Services. Includes guards, security protection, maintenance of law and order, and crime prevention measures. (Assigned personnel)

10. Safety. Includes operation of safety programs, educational support, and promotional efforts. (Assigned personnel)

11. Shuttle Services. Includes common use taxies, vans and bus transportation services. (Assigned personnel)

B. OPTIONAL REIMBURSEMENT SUPPORT CATEGORIES. Supplying components are permitted to require reimbursement for the following services only from components who choose to use the service. Reimbursement should be based on the level of service provided to each receiver. Charges may not include reimbursement for services not authorized to receive appropriated funds.

1. Administrative Services. Includes records management, personnel locator, document control and handling, forms and publications, copying services, Armed Forces Courier Service support, and maintenance of official publications reference libraries. Also includes mail sorting, routing, and delivery services not provided by the United States Postal Service.

2. Audio/Visual Services. Includes still photography, graphics, presentation services, films, microfilms, micrographic services, video tapes, and other visual media information services.

3. Automated Data Processing/Automation Services. Includes data processing services and systems analysis, design, development, execution, and life cycle maintenance.

4. Civilian Personnel Services. Includes employment, placement, classification, employee management, labor relations, employee development, and equal employment opportunity services related to civilians and local nationals.

5. Clubs. Includes officer, enlisted, all hands, aero, community, and other recreational clubs. Also includes golf courses, bowling alleys, campgrounds, marinas, and related services.

6. Communication Services. Includes base communications facilities, telephone equipment and services. May also include leasing of communication equipment, lines, and special communications-electronics equipment services.

7. Community Support Services. Includes child development and care programs, youth services, family support center activities, hobby shops, and craft centers.

8. Confinement and Detention Centers. Includes the provision of personnel confinement and detention services.

9. Custodial Services. Includes janitorial and cleaning services for offices, common use areas, shops, and storage areas.

10. Education Services: Includes instruction, counseling, and testing.

11. Engineering Support. Includes planning, design and programming functions necessary to the construction, fabrication, and repair of facilities and equipment.

12. Equipment Operation, Maintenance, and Repair. Includes motor pool operations, maintenance and repair services. Also includes maintenance and repair of industrial equipment, electronic equipment, and office equipment.

13. Explosive Ordnance. Includes services and facilities for explosive ordnance storage, disposal and training.

14. Facilities and Real Property Support. Includes the provision of facilities and real property. Also includes construction of new facilities and structures, addition to existing facilities, and alterations that change the use of existing facilities.
15. Facility Maintenance and Repair. Includes maintenance and repair of real property, installed equipment, miscellaneous structures, roads, grounds, railroads, and surfaced areas. Also includes entomology and pest control.
16. Finance and Accounting. Includes expense, reimbursement, working fund, payroll and leave accounting. Also includes disbursing, voucher and invoice examination, financial reporting, and the development of accounting systems.
17. Food Services. Includes provisioning, preparation and serving of food to authorized personnel, and the operation of dining facilities.
18. Health Services. Includes furnishing of outpatient testing, treatment, rehabilitation, and associated professional services and medical support; may also include inpatient services. Also includes environmental health inspections, quality assurance services, and veterinarian services.
19. Housing and Lodging Services. Includes accommodations and housing referral services for authorized personnel. Also includes the provision of transient accommodations.
20. Information Services. Includes technical and legal libraries and services that provide limited reference information for specific purposes.
21. Installation Retail Supply and Storage Operations. Includes the storage and distribution of commodities, materials, equipment and fuels. Also includes all operations from receipt of materiel and equipment into storage to issue and shipment of items from storage.
22. Laundry and Dry Cleaning. Includes cleaning, storage, and delivery.
23. Legal Services. Includes the provision of advice and services on all legal matters pertaining to legal assistance, military justice, initial claims processing, property utilization, award and execution of procurement contracts, and personnel matters such as conflicts of interest, standards of conduct, and grievance hearings/reviews.
24. Military Personnel Support. Includes passport, forces stamp, social security, and other personal affairs services for military personnel. Also includes processing of identification cards, testing of individuals, line-of-duty investigation reports, casualty assistance reporting, noncombatant evacuation operations, relocation assistance, and transition assistance.
25. Mobilization Support. Includes planning, provisioning and support for mobilization of reserve and guard forces.
26. Mortuary Services. Includes CONUS, port, and overseas mortuary services.
27. Printing and Reproduction. Includes the operation of centralized printing and duplication services.

28. Purchasing and Contracting Services. Includes acquisition and contract administration services for procurement of property, equipment, services, and supplies. Also includes services for renting and leasing equipment, facilities and real property.

29. Refuse Collection and Disposal. Includes collection and disposal of trash and waste materials. Also includes operation of incinerators and other facilities and equipment intended for the transportation, disposal, or destruction of waste materials.

30. Resource Management. Includes funds management, cost analysis services, and formulation, reporting and execution of operating budgets. Also includes reports of surveys actions.

31. Training Services. Includes instructions and use of target ranges, simulators and other training facilities.

32. Transportation Services. Includes travel office services, and other transportation services related to both commercial and government owned transportation of personnel and materiel. Also includes shipment planning, packing and crating, port clearance, scheduling, processing of transportation documents, and provision of related transportation services for both personnel and personal property.

33. Utilities. Includes the provision for procurement, production and distribution of utilities, heating, and air conditioning. Also includes energy consumption and conservation programs.

34. Weather Services. Includes advising and providing timely notification of weather conditions that would affect planned activities.

35. Other Support. Includes services not related to any other support category.

C. NON-REIMBURSABLE SUPPORT CATEGORIES. These are examples of services which are supported with revenues generated by the services they provide, contributions, or direct appropriations from the Congress or a Military Service.

1. Commissary Services. Includes services provided by the Defense Commissary Agency (DeCA).

2. Community Relations. Includes open house programs, charity fund raising events, and public relations activities.

3. Dependent Schools. Includes services provided by DoD Dependent Schools.

4. Exchange Services. Includes services provided by the Army & Air Force Exchange Service, Navy Exchange Service, and Marine Corps Exchange Service.

5. Museums. Includes facilities and services that display objects of historical military value and significance.

6. Retired Affairs. Includes operation of retired affairs support offices and provision of special services, activities and programs provided primarily for retired personnel.

JOINT INTERSERVICE REGIONAL SUPPORT GROUP (JIRSG)  
LOCATIONS

<u>NAME</u>	<u>GEOGRAPHIC AREA</u>	<u>LEAD SERVICE</u>	<u>LEAD ACTIVITY</u>
South 1	Atlanta, GA	Army	Fort McPherson, GA
South 2	Mississippi, Louisiana	Air Force	Keesler AFB, MS
South 3	South Carolina	Navy	Naval Supply Center Charleston, SC
South 4	Orlando, FL	Navy	Naval Training Center Orlando, FL
South 6	Jacksonville, FL	Navy	Naval Air Station Jacksonville, FL
South 7	Kentucky, Tennessee, Indiana	Army	Fort Knox, KY
South 9	Miami, South Florida	Air Force	Homestead AFB, FL
South 12	Pensacola, FL	Navy	Naval Air Station Pensacola, FL
South 13	Raleigh, NC	Army	Fort Bragg, NC
South 14	Jacksonville, NC	Marine Corps	Marine Corps Base, Camp Lejeune, NC
South 15	South Georgia, Alabama	Marine Corps	Marine Corps Logistics Base, Albany, GA
North 2	Massachusetts, Maine, Connecticut, Rhode Island, Delaware, New Hampshire, Vermont	Air Force	Hanscom AFB, MA
North 3	Chicago, IL	Navy	Naval Training Center Great Lakes
North 5	Columbus, OH	DLA	Defense Construction Supply Center, Columbus, OH
North 6	Dayton, OH	Air Force	Wright Patterson AFB, OH
North 7	Pennsylvania	Army	Letterkenney Army Depot, PA

<u>NAME</u>	<u>GEOGRAPHIC AREA</u>	<u>LEAD SERVICE</u>	<u>LEAD ACTIVITY</u>
North 9	New Jersey	Army	Fort Monmouth, NJ
North 10	Norfolk and Richmond, VA	Navy	Naval Base Norfolk, VA
North 11	Philadelphia, PA	Navy	Naval Aviation Supply Office, Philadelphia, PA
North 15	Washington, DC	Navy	HQ, Naval District Washington, DC
Central 3	Colorado Springs, CO	Air Force	Air Force Academy, CO
Central 4	Corpus Christi, TX	Navy	Chief of Naval Air Training, Corpus Christi, TX
Central 6	Denver, CO	Air Force	Lowry AFB, CO
Central 8	Little Rock, AR	Air Force	Little Rock AFB, AR
Central 10	Central and North Texas	Air Force	Randolph AFB, TX
Central 12	Missouri and Illinois, excluding Chicago area	Air Force	Scott AFB, IL
West 2	Barstow, CA	Marine Corps	Marine Corps Logistics Base, Barstow, CA
West 6	Sacramento, CA	Air Force	McClellan AFB, CA
West 7	Salt Lake City, UT	Air Force	Hill AFB, UT
West 8	San Diego, CA	Navy	Naval Base San Diego, CA
West 9	San Francisco and Monterey, CA	Navy	Naval Base San Francisco, CA
West 10	Seattle, WA	Army	Fort Lewis, WA
West 11	Stockton, CA	DLA	Defense Depot Region West, Stockton, CA
Pacific 1	Guam	Navy	Commander, US Naval Forces, Marianas
Pacific 2	Hawaii	Army	Fort Shafter, HI

<u>NAME</u>	<u>GEOGRAPHIC AREA</u>	<u>LEAD SERVICE</u>	<u>LEAD ACTIVITY</u>
Pacific 3	Japan	Air Force	Fifth Air Force, Japan
Pacific 4	Korea	Army	HQ US Forces Korea
Pacific 6	Okinawa	Marine Corps	Marine Corps Base, Camp Butler
Pacific 7	Alaska	Air Force	Elmendorf AFB, AK
Europe 1	Germany, excluding Kaiserslautern area	Army	US Army Europe (USAREUR), Heidleberg
Europe 6	Kaiserslautern, GE	Air Force	Ramstein AFB
Europe 8	Italy	Army	US Army Southern European Task Force (USASETAF), Vicenza
Europe 10	United Kingdom	Air Force	Third Air Force, Royal Air Force, Mildenhall
Southcom 1	Panama	Army	US Army South (USARSO), Panama

NOTE:

Recommended additions, deletions, changes and updates should be forwarded to the DRIS Steering Committee, Assistant Secretary of Defense (Production and Logistics), the Pentagon, Washington DC 20301-8000.

NAVY MEDICAL DEPARTMENT FACILITIES NEAR DVA FACILITIES

Naval MTF by Region

DVA Facilities

NAVHOSP Great Lakes, IL	VAMC North Chicago, IL VAMC Hines, IL VAMC Lakeside, Chicago, IL* VAMC Westside, Chicago, IL* VAMC Wood, Milwaukee, WI*
NAVHOSP Newport, RI	VAMC Providence, RI
NAVHOSP Groton, CT	None
BRMEDCLINIC St. Albans, NY	VAMC Brooklyn, NY
NAVMEDCLINIC Philadelphia, PA	VAMC Philadelphia, PA VAMC Coatesville, PA VAMC Wilmington, DE
NAVMEDCLINIC Portsmouth, NH	VAMC Togus, ME
NAVHOSP Portsmouth, VA	VAMC Hampton, VA
NAVHOSP Charleston, SC	VAMC Charleston, SC
NAVHOSP Beaufort, SC	VAMC Charleston, SC
NAVHOSP Roosevelt Roads, PR	VAMC San Juan, PR
NATNAVMEDCEN Bethesda, MD	VAMC Baltimore, MD VAMC Washington, DC
NAVHOSP Corpus Christi, TX	VAMC San Antonio, TX**
NAVHOSP Millington, TN	VAMC Memphis**
NAVMEDCLINIC New Orleans, LA	VAMC Biloxi, MS**
NAVHOSP Orlando, FL	VAMC Tampa, FL**
NAVHOSP Jacksonville, FL	VAMC Gainesville, FL** VAMC Lake City, FL**
BRMEDCLINIC Athens, GA	VAMC Atlanta, GA
NAVMEDCLINIC Key West, FL	VAMC Miami, FL**

\* Distance 40 - 60 miles from naval MTF

\*\* Distance 61 - 161 miles from naval MTF

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Naval MTF by Region

NAVHOSP San Diego, CA  
NAVHOSP Camp Pendleton, CA  
  
NAVHOSP Long Beach, CA  
  
NAVMEDCLINIC Port Hueneme, CA  
NAVHOSP Bremerton, WA  
  
NAVMEDCLINIC Seattle, WA  
BRMEDCLINIC Coos Head,  
Charleston, OR  
NAVHOSP Oakland, CA  
  
BRMEDCLINIC Moffett Field,  
Sunnyvale, CA  
NAVHOSP Lemoore, CA  
BRMEDCLINIC NAS Fallon, NV  
NAVMEDCLINIC Pearl Harbor, HI  
NAVHOSP Guam

DVA Facilities

VAMC San Diego, CA  
VAMC San Diego, CA  
VAMC West Los Angeles, CA  
  
VAMC Long Beach, CA  
VAMC West Los Angeles, CA  
  
VAMC Sepulveda, CA  
VAMC America Lake,  
Tacoma, WA  
  
VAMC Seattle, WA  
  
VAMC Roseburg, OR\*\*  
  
VAMC San Francisco, CA  
VAMC Martinez, CA  
VAMC Livermore, CA  
  
VAMC Palo Alto, CA  
VAMC Fresno, CA  
VAMC Reno, NV  
VARO Honolulu, HI  
VARO Honolulu, HI

\* Distance 40 - 60 miles from naval MTF.  
\*\* Distance 61 - 161 miles from naval MTF.

SAMPLE FORMAT FOR GENERAL  
MEMORANDA OF UNDERSTANDING (MOUs)

1. General

a. Type of Action. Indicate whether the agreement is a new proposal, renewal with changes, or renewal with no changes.

b. Participants and Types of Agreements. Indicate whether the participants are the supplier, the receiver, or both; indicate whether the agreement is interservice, intraservice, or between Medical Department activities and non-Federal Government agencies or the private sector.

c. Type of Service. Indicate whether the agreement is for health services, base operations and administrative services, training, research protocols, contingency support, or other services.

d. Statement of Benefits to BUMED. State MOU benefits and indicate that benefits have been concurred with by the participating organizations.

2. Support Categories

a. List support categories supplied or received by Medical Department activities.

b. Describe specific supplier and receiver responsibilities.

3. Key Considerations

a. Include legal language to ensure liability and other legal concerns are addressed.

b. Include resource language to discuss the impact of manpower and resource commitments on the participants' assigned mission and functions. (DD 1144 or savings accrued/costs incurred documentation must accompany each MOU and specify manpower and dollar estimates for reimbursable, nonreimbursable, and common-service charges.)

c. Include program and functional language to discuss quality assurance concerns and impacts on other programmatic or efficiency efforts.

4. Effective Period. State that the effective period of the MOU is from (date) through (date) (a period of not more than 1 year), and may be renewed without change, except for dates, on a year-to-year basis, by the mutual, written agreement of the parties.

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5. Termination. Termination may be effected by either party, upon written notice when deposited in the United States Postal Service mail. (See table 1, column 6 for the command authorized to terminate MOUs.)

6. Amendment. State that it is agreed that changes to this MOU, except for dates, must be submitted for approval to the approval authority designated in table 1, column 6, via the chain of command.

7. Concurrence. State that all parties to this MOU concur with the level of support and resource commitments that are documented herein.

---

Signature and Date  
Title  
Address  
(Insert supplier's address)

---

Signature and Date  
Title  
Address  
(Insert receiver's address)

---

Signature and Date  
Title  
Address  
(Insert approval authority's address)

---

Signature and Date  
Title  
Address  
(Insert approval authority's address)

Superseded by  
BUMEDINST 7050.3 of  
10-26-95

BUMEDINST 7050.1  
20 Apr 93

GUIDELINES TO ESTABLISH  
NON-FEDERAL TRAINEE MOUs

1. General. Formal training arrangements may be authorized between accredited non-Federal health training institutions and Navy health care facilities, to permit specific categories of non-Federal trainees an opportunity to acquire a portion of their clinical learning experiences in the Medical Department activity.

2. Policy. Commanding officers may entertain affiliation proposals or petitions from accredited non-Federal institutions engaged in full-time teaching or health care education and training, to permit participation of non-Federal trainees (i.e., students, interns, or residents) in Navy patient care as an opportunity to acquire a portion of their required clinical learning experiences. Such affiliations may be considered feasible only when such arrangements will not interfere with the mission or functions assigned by higher authority. Submit all recommended affiliation proposals or petitions with justification and a completed proposed MOU to BUMED for review and approval. Upon BUMED approval of the proposed MOU, and signature by both parties, the MOU becomes the formal basis for accepting, appointing, and assigning authorized groups of non-Federal trainees to positions within MTFs and DTFs as detailed in the MOU. The following factors must be observed in considering and implementing an MOU:

a. Non-Federal trainees as defined in reference (d) are not to be used to fill vacant or gapped billets, or to expand services. Non-Federal trainees' purpose is not to provide services. Their purpose is to participate in clinical learning experiences. In all likelihood productivity will decrease, not increase, in the true teaching environment.

b. Non-Federal trainees are not licensed or certified nor should they be permitted to work independently. They must be provided direct supervision at all times, by an appropriate practitioner in their field of study. The supervisor must be involved in the decision-making process as follows:

(1) Verbal. The supervisor must be contacted by telephone, radio, or message before implementing or changing a regimen of care, except in the case of dire emergency.

(2) Physically Present. The supervisor must be present through all or a portion of care. In a fixed MTF or DTF, direct supervision may be shown by the supervisor's co-signature of the patient's record before the patient's departure from the facility. Direct supervision is normally provided by faculty or staff members employed by the non-Federal institution, to minimize the impact on productivity of the MTF or DTF. However,

Enclosure (4)

the MTF or DTF may elect to designate MTF or DTF staff members to assume responsibility for direct supervision of the non-Federal trainees, with the clear understanding that the assumption of this responsibility could impact on clinical productivity. Under no circumstances may the MTF or DTF staff member accept faculty appointments of any kind at the non-Federal institution for the purpose of providing direct supervision of the non-Federal trainees, except as allowed by reference (b).

c. Non-Federal trainees are not considered volunteers while assigned to specific Medical Department activities for training. While the trainee might have the option of choosing the site for the clinical training, the non-Federal trainee's clinical experience is a requirement of that trainee's program of study at the non-Federal institution. Although references (e) and (f) provide authority and guidance for Federal departments and agencies' acceptance of volunteer service by students, references (g) and (h) prohibit acceptance of medical and dental services by volunteers not sponsored by the American National Red Cross. Other organizations desiring to render medical and dental aid, may do so only through the Red Cross.

### 3. Procedures

a. Accredited non-Federal institutions desiring a Navy training affiliation with an MTF or DTF must submit the following information to the commanding officer:

(1) A proposal with the description and specific clinical learning requirements of the program, and a request for their trainees to participate in Navy patient care at the facility.

(2) A statement that the non-Federal institution is either a nonprofit or a proprietary, for profit organization.

(3) An estimate of the number of trainees per rotation, approximate hours per week, per student, the length of the rotation, and number of rotations per year.

(4) Certification that the trainees will not be charged by the non-Federal institution for services, educational supplies, and materials provided by the Medical Department activity.

(5) Certification that the non-Federal institution will provide faculty or staff members employed by the non-Federal institution to be responsible for direct supervision and instruction of the trainees during their clinical learning experience at the Medical Department activity, or a request that the Medical Department activity assume responsibility for the direct supervision and instruction.

(6) Certification that the non-Federal institution will provide liability insurance coverage for their faculty and staff members responsible for supervising and instructing trainees, and for trainees, while they are involved in direct patient care at the Medical Department activity.

b. The commanding officer desiring to affiliate with a non-Federal institution to provide clinical experience for non-Federal trainees must forward to BUMED:

(1) The proposed MOU, using the format provided in this enclosure.

(2) The non-Federal institution proposal with an impact statement which discusses:

(a) The merits of the clinical training program.

(b) The probable impact on command programs.

(c) An estimate of probable cost to the command in terms of man-hours, salaries, supplies, equipment, and facilities required for direct and indirect support of the proposed training program.

(d) An estimate of the benefits which might accrue to the Navy and the command, if the MOU is approved.

(3) A written legal review from a Judge Advocate General Corps (JAGC) officer. If a JAGC officer is not assigned to an MTF or DTF, consult your local Navy legal service office or Marine Corps Law Center.

(4) Names and phone numbers of the command's primary and alternate points of contact for non-Federal trainees MOUs.

c. Submit proposals for new non-Federal trainee MOUs 90 days before the anticipated start date of the MOU.

4. Status of Non-Federal Trainees. Non-Federal trainees authorized by references (i) and (j), and an approved MOU must be given a limited, excepted schedule A appointment for temporary, intermittent training assignments by the participating Medical Department activity's servicing civilian personnel office. Non-Federal trainees appointed under these MOUs cannot be paid a stipend or provided any other reimbursement by the Medical Department activity for services rendered under the terms of the MOU. While not direct remuneration, exchange or commissary, officer's club, and Navy unaccompanied personnel housing (Bachelor Quarters) privileges are considered compensation and are not permitted.

5. Employee Records. Maintain the following for each non-Federal trainee appointed as a result of such MOUs:

a. A copy of all licenses required by applicable Office of Personnel Management (OPM) regulations for the category of positions to which appointed.

b. Standard Form 171, Personnel Qualifications Statement.

c. Standard Form 50, Notification of Personnel Action or "List Form" instead of Standard Form 50.

d. Standard Form 61, Appointment Affidavits and Standard Form 61B, Declaration of Appointee.

e. Brief statement of duties or services performed.

f. Record of attendance to include date and time.

g. Documentation reflecting name of sponsoring non-Federal health training institution.

h. Documentation reflecting the name of the faculty or staff member employed by the non-Federal institution or the MTF or DTF individual responsible for the direct supervision and instruction of the trainees.

i. Documentation reflecting the name of the non-Federal institution's coordinator for scheduling assignments.

j. Documentation reflecting the title of the MTF or DTF individual assuming overall responsibility for the trainees while they are involved in patient care at the MTF or DTF, and the name of the MTF or DTF coordinator for scheduling of assignments (one individual may be assigned both functions).

6. Command Records. In addition to the required employee records, a complete record must be maintained as a single, official source of documentation for each active affiliation entered into by the command. Such records must include correspondence relating to the program; a copy of the approved, signed, and dated MOU; appointment, withdrawal, renewal, amendment, and termination actions.

7. Changes, Amendments, and Renewals. Requests for changes, amendments, and renewals of existing MOUs require written approval from BUMED before execution. Submit to BUMED 60 days before anticipated effective date.

SAMPLE FORMAT FOR NON-FEDERAL TRAINEES MOU  
AND GUIDELINES FOR ESTABLISHMENT

MEMORANDUM OF UNDERSTANDING  
BETWEEN  
(NAME AND ADDRESS OF MEDICAL DEPARTMENT ACTIVITY)  
AND  
(NAME AND ADDRESS OF NON-FEDERAL INSTITUTION)

1. General

a. The governing body of the (name of non-Federal institution), hereinafter referred to as the participating institution, has established an approved professional program of training for (category\*) students which requires bona fide students enrolled therein to participate in clinical learning experiences as set forth in the program curriculum.

b. The (name of Medical Department activity), hereinafter referred to as the naval activity, under the jurisdiction of the Department of the Navy, is engaged in certain clinical activities in which bona fide (category\*) students enrolled in the above professional program, if allowed to participate in Navy patient care or research, can obtain part of their required clinical learning experience.

c. It is to the benefit of the participating institution to permit (category\*) students enrolled in the professional program at the participating institution to participate in Navy patient care or research at the naval activity, to obtain a part of their required clinical learning experience.

d. It is to the benefit of the naval activity to allow bona fide (category\*) students enrolled in the above professional program of the participating institution to participate in Navy patient care or research, to obtain a part of their clinical learning experience, thereby contributing to the educational preparation of a future supply of health care professionals.

2. Understanding

a. Insofar as the commanding officer of the naval activity deems it appropriate and consonant with the basic mission of the command, the naval activity will:

---

\* Insert category of student. Be specific, e.g., for student social work, enter "social work;" for student dental hygienist, enter "dental hygiene," etc.

(1) Designate by title, the naval activity individual assuming overall responsibility for trainees participating under this MOU. The naval activity designee for this MOU is \_\_\_\_\_.

(2) Privilege those faculty or staff members of the participating institution who will directly supervise and instruct trainees while participating in patient care at the naval activity, per BUMEDINST 6320.66A. Ensure that instructors and supervisors of the participating institution are licensed or certified per SECNAVINST 6401.2A.

(Note: Use the above paragraph only if the non-Federal institution is providing a faculty or staff member employed by that non-Federal institution to supervise and instruct the students. Use the paragraph below if the naval activity staff is providing direct supervision and instruction.)

(2) Designate by title, the naval activity individual responsible for direct supervision and instruction of trainees while participating in patient care at the naval activity. The naval activity designee for this MOU is \_\_\_\_\_.

(3) Appoint such numbers of (category\*) students as the commanding officer may deem appropriate, who are enrolled in the professional program at the civilian institution to participate in Navy patient care or research following the Federal Personnel Manual (FPM), chapter 213, appendix A.

(4) Coordinate with the participating institution to prevent conflict of schedules and activities during the clinical learning experience, and designate an appropriate coordinator for this purpose. This coordination involves planning, with the faculty or staff of the institution, the assignment of trainees to specific clinical cases and experiences, including attendance at selected conferences, clinics, courses, and programs conducted by the naval activity.

(5) Provide identification badges or tags which include the trainee's name, school affiliation, and status, i.e., "trainee," "student," etc. Ensure these badges are displayed at all times while trainees are onboard the naval activity.

(6) Provide, whenever possible, in conjunction with the clinical learning experience, reasonable classroom, conference room, offices, dressing room, locker room, and storage space for participating trainees and their supervisors.

(7) Permit, upon request, the inspection of appropriate clinical facilities by agencies charged with the responsibility for accreditation of the participating institution.

b. The participating institution will:

(1) Provide liability insurance coverage under the participating institution's insurance program, and name the United States as an additional insured party under any such insurance policy, said policy to protect the United States against financial liability arising from the negligent or wrongful acts or omissions of participating institution staff, faculty, and trainees who are involved in patient care in the naval activity. If this insurance coverage is not provided by the participating institution on behalf of the United States, the participating institution agrees to indemnify and hold the United States harmless against any and all liability and expenses that may be imposed by law against the United States as a result of the negligent or wrongful acts or omissions of participating institution staff, faculty, and trainees who are involved in patient care in the naval activity.

(2) In the event of receipt of a notice of a claim, complaint, or suit relating to care under this agreement involving an agent of the participating institution, the participating institution agrees to cooperate fully with the U.S. Government in its investigation, negotiation, settlement, or defense. The Government likewise will cooperate with the participating institution.

(3) Before the beginning of each training period (i.e., rotation), provide the name of the faculty or staff member employed by the civilian institution who will provide direct supervision and instruction of the trainees participating in patient care at the naval activity during that rotation.

(Note: Use the above paragraph only if the non-Federal institution is providing a faculty or staff member employed by that non-Federal institution to supervise and instruct the students. Use the paragraph below if the naval activity staff is providing direct supervision and instruction.)

(3) Before the beginning of each training period (i.e., rotation), provide the names of the trainees eligible to be assigned, the dates and hours assignment is desired, and the clinical services to which assignment is requested.

(4) Require the supervising faculty or staff members employed by the civilian institution and trainees to participate in the (insert naval activity's and sponsoring department's Quality Assurance and Risk Management Programs). The participation will include a 100 percent chart review, of all work performed in addition to any other requirements of these programs.

(Note: Use the above paragraph only if the non-Federal institution is providing a faculty or staff member employed by that non-Federal institution to supervise and instruct the students. Use the paragraph below if the naval activity staff is providing direct supervision and instruction.)

(4) Require the trainees to participate in the (insert naval activity's and sponsoring department's Quality Assurance and Risk Management Programs). The participation will include a 100 percent chart review, of all work performed in addition to any other requirements of these programs.

(5) Provide faculty or staff members employed by the civilian institution to plan, with the coordinator of the naval activity, the trainees' clinical learning experience assignments at the naval activity, and their attendance at selected conferences, clinics, courses, and other programs conducted by the naval activity.

(6) Provide the materials and maintain the personnel records and reports required to conduct and document the trainees' clinical learning experience.

(7) Enforce regulations governing the trainees and their instructors and supervisors employed by the civilian institution, and the conduct of each as directed by the commanding officer of the naval activity.

(8) Be responsible for physical examinations and such other medical and dental examinations and protective measures as the naval activity deems necessary.

(9) Permit trainees to accept intermittent, limited schedule A appointments following the provisions of the FPM, chapter 213, appendix A; for the purpose of participating in clinical learning experiences at the naval activity. Advise trainees that such an appointment will not entitle them to any stipend or other reimbursement from the naval activity for services performed.

(10) Require that materials compiled or published by trainees of the participating institution relative to their training and clinical experiences received at the naval activity, or arising from their participation in Navy patient care, clearly state that the opinions or assertions contained therein are those of the writer and are not to be construed as official or reflecting the views and opinions of the DON. Such materials or publications must not infringe on, violate, or compromise the patients' right to privacy.

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(11) The participating civilian institution, its personnel, and trainees must abide by DON rules concerning the confidentiality of patient records, as embodied by the Privacy Act of 1974.

(12) The participating civilian institution, its personnel, and trainees must abide by DON regulations concerning release of information on matters pertaining to, or services delivered under this agreement to the public, including advance approval from the DON before publication of technical papers in professional and scientific journals.

3. Withdrawal. It is further understood and agreed that the participating institution, upon notice from the commanding officer that further participation by a student is not desirable, will withdraw such student from participation in clinical learning experiences at the naval activity.

4. Effective Period. The effective period of this MOU will be from     (date)     through     (date)     and may be renewed biennially without change, except for dates, upon mutual agreement of all parties, and written approval from BUMED.

5. Amendments. It is agreed that changes to this MOU must be submitted for approval to the signatories listed below, and BUMED. Changes may not be executed before receipt of BUMED approval.

6. Termination. Termination may be effected by either party upon written notice when deposited in the United States Postal Service mail and directed to the other party, notice being given at the address below. In the event that either party elects to terminate this agreement, written approval must be obtained from BUMED for students to complete rotations already in progress.

7. Concurrence. All parties to this MOU concur with the level of support and resource commitments that are documented herein.

\_\_\_\_\_  
Signature and Date  
Title  
Naval activity and address

\_\_\_\_\_  
Signature and Date  
Title  
Non-Federal institution and  
address

Approved by:

\_\_\_\_\_  
Signature and Date  
Title of approving authority  
Non-Federal institution



Department of Veterans Affairs

VA/Department of Defense Sharing Agreement

INSTRUCTIONS:

1. A proposed agreement must be signed by both parties and submitted to the approving authorities in each agency. Normally, agreements will go into effect 46 days after receipt by the approving authorities provided no disapproval has been transmitted in writing to one or both parties signing the agreement. Agreements will go into effect earlier than the 46-day period if approvals are obtained from both departments' approving authorities. Agreements may go into effect more than 46 days after receipt if a later date is indicated in Box 3.
2. If acquisition of additional resources is required, approval must be obtained for the additional resources from the department providing the resources prior to submitting the proposal.
3. The providing organization will prepare a SF-1080 and send it to the receiving organization's office to be billed. Billing will be on a monthly basis except for agreements involving low numbers of beneficiaries or costs, which may justify quarterly billing.
4. Rates should be established for all shared services and bills rendered for services provided. It is improper to exchange services without the preparation of bills. Payments may be at the billed rate or offset against payments due.
5. Amendments to this agreement shall be submitted for approval as new sharing agreements pursuant to section 3-101 of the VA/DoD Sharing Guidelines. This agreement will remain in force during the period stated unless terminated at the request of either party after thirty (30) days' notice in writing. To the extent that this contract is so terminated, each party will be liable only for payment in accordance with provisions of this agreement for resources provided prior to the effective date.
6. In the event of war or national emergency, this agreement may be terminated immediately upon written notice by the Department of Defense.
7. The agreement is subject to the availability of funds for the period after September 30 in succeeding fiscal years.

1. AGREEMENT NUMBER (Leave blank)	2. TYPE OF ACTION (Mark "X") <input checked="" type="checkbox"/> New agreement <input type="checkbox"/> Renewal (Replaces _____) <input type="checkbox"/> Amendment (Amends _____)	3. AGREEMENT PERIOD (Month/Year) <u>02, 02, 93</u> TO <u>01, 31, 94</u>
-----------------------------------	---	--

4. VA FACILITY (Name/Address)  
VAMROC  
Anywhere, State, Zip Code

5. DOD FACILITY (Name/Address)  
Naval Hospital, Anywhere, State, Zip Code

6. DIRECT PAYMENTS TO: (Name/Address)  
Naval Hospital, Anywhere, State, Zip Code

7. OFFICE TO BE BILLED/BILLING FREQUENCY (Name/Address) (Quarterly)  
Veterans Administration                      Medical Administration Service  
Medical and Dental Office Center              Anywhere, State, Zip Code

8. GENERAL PROVISIONS: (To be included in all agreements)  
a. The authority for this agreement is Public Law 97-174, "Veterans Administration and Department of Defense Health Resources Sharing and Emergency Operations Act," 38 U.S.C. 8111 and the VA/DoD Health Care Resources Sharing Guidelines which are in the Memorandum of Understanding between VA and DoD, dated July 29, 1983.

9. OTHER PROVISIONS:  
  
(Indicate any special reimbursement provisions or limitations agreed upon. An attachment of specific provisions, similar to that provided on page 3 of enclosure (6), may be prepared to clearly identify responsibilities. Any such attachment should be referenced here.)

(Continue on Reverse)

10A. DESCRIPTION OF SERVICES PROVIDED BY VA:

SERVICE

NUMBER

ESTIMATED REIMBURSABLE EARNINGS

(Provided by DVA)

Inpatient Psychiatry	7 days of care per month	\$159.00 per day
Inpatient Surgical	8 days of care per month	\$260.00 per day
Radiology Reports (Dictated on cassette tape, not transcribed)	500 studies per month	\$ 6.00 per study

10B. DESCRIPTION OF SERVICES PROVIDED BY DOD:

SERVICE

NUMBER

ESTIMATED COST

(Provided by DoD)

General Medical and Surgical	6 visits per month	\$ 56.00 per visit
------------------------------	--------------------	--------------------

11. SIGNATURE/TITLE OF VA MEDICAL CENTER DIRECTOR

*Able T. See*

ABLE T. SEE  
Center Director

DATE

10 FEB 93

12. SIGNATURE/TITLE OF AUTHORIZED DEPARTMENT OF DEFENSE OFFICIAL

*John I. Goode*

JOHN I. GOODE  
Commanding Officer

DATE

17 FEB 93

SAMPLE FORMAT FOR  
ONE-TIME TRANSFER OF RESOURCES MOUs

1. Purpose. The purpose of this agreement is to transfer health care functions from (insert complete title of command transferring resources), hereinafter referred to as the transferring activity, to (insert complete title of command receiving resources), hereinafter referred to as the receiving activity. These resources include funding, manpower, facilities, and associated equipment as listed below. This transfer is subject to the concurrence of the respective major claimants and the Chief of Naval Operations and, when applicable, the Commandant of the Marine Corps.

2. Funding. Until a functional transfer occurs between major claimants, all operational expenses of the receiving activity, the gaining command, must be per NAVCOMPTMAN 075004, paid by the gaining command and reimbursed by the transferring activity, the losing command, through the first full year after the functional transfer. This includes reimbursement for investment equipment, maintenance of real property, utilities, travel, civilian pay, supplies, rent, purchases (contractual) services, communications, purchased civilian health care, and all other expenses. The estimated amounts of reimbursement per category of support are as follows:

<u>Category</u>	<u>FY</u> <u>(in \$000)</u>	<u>FY</u> <u>(in \$000)</u>
Equipment Maintenance		
Supplies		
Purchased Services		
Travel		
Civilian Pay		
Utilities		
Telephone		
Rent		
Training		
Other Expenses	_____	_____
Total	_____	_____

3. Manpower. All manpower to be transferred must be identified by billet sequence code (BSC) or position sequence code (PSC). Any change in billet or position authorization after the date of this agreement must be by mutual agreement between the transferring and receiving activities and their respective major claimants.

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<u>Category</u>	<u>FY-</u> <u>(Numbers)</u>	<u>FY-</u> <u>(Numbers)</u>	<u>FY-</u> <u>(Numbers)</u>	
Officer				
Enlisted				
Civilian				
		Desig/Rate or <u>Civ Grade</u>	NOBC/NEC or <u>Series</u>	<u>Total Number</u>
<u>BSC/PSC</u>	<u>Title</u>			

(Complete each column for each BSC/PSC to be transferred).

4. Budget Summary of Funding and Resources Data

<u>Data Element</u>	<u>Receiving Activity</u>	<u>Transferring Activity</u>
Activity Group		
Sub-activity Group		
Program Element		
Major Claimant UIC		
Affected Command UIC		
Funding (in \$000s)		
Civilian End Strengths		
Military End Strengths		

5. Facilities, Equipment, and Supplies. All facilities, capital investment and minor equipment, and supplies at the medical activity of the transferring activity must be transferred to the receiving activity. Refer to attachment 1 for a current listing of facilities, equipment, and supplies to be transferred. Any change to attachment 1, after the date of this agreement, must be by mutual agreement between the transferring and receiving activities, and their respective major claimants.

6. Concurrence. All parties to this MOU concur with the above funding, manpower, and other resource commitments that are associated with the functional transfer that are documented herein.

\_\_\_\_\_  
Signature, Date, and Title  
(Insert transferring activity's  
address)

\_\_\_\_\_  
Signature, Date, and Title  
(Insert receiving activity's  
address)

\_\_\_\_\_  
Signature, Date, and Title  
(Insert transferring claimant's  
address)

\_\_\_\_\_  
Signature, Date, and Title  
(Insert receiving claimant's  
address)

ATTACHMENT 1

SCHEDULE OF FACILITIES, EQUIPMENT, AND  
SUPPLIES TO BE TRANSFERRED

1. Facilities. The following facilities are to be transferred:

<u>Building Number</u>	<u>Intended Usage</u>
------------------------	-----------------------

(Complete each column for each building to be transferred. If no buildings (i.e., facilities) are to be transferred, enter "None" in this paragraph.)

2. Equipment. The following equipment is to be transferred:

<u>Plant Account Number</u>	<u>Description</u>	<u>Building/Room Number</u>
-----------------------------	--------------------	-----------------------------

(Complete each column for each piece of equipment to be transferred. If no equipment is to be transferred, enter "None" in this paragraph.)

3. Supplies. The following supplies are to be transferred:

<u>Stock Number</u>	<u>Description</u>	<u>Building/Room Number</u>
---------------------	--------------------	-----------------------------

(Complete each column for each supply line item to be transferred. If no supplies are to be transferred, enter "None" in this paragraph.)

SAMPLE FORMAT FOR NAVY TRAINEE MOUS  
(INTEGRAL PARTS OF TRAINING)

1. The Naval Health Sciences Education and Training Command has established full-time outservice training in an approved professional program for (name of trainee) to participate in clinical learning experiences or training.
2. The (name of non-Federal institution), hereinafter referred to as (abbreviated title of non-Federal institution), is engaged in certain activities in which bona fide (category) trainees enrolled in the above professional program, if allowed to participate in training, patient care, or research at the (non-Federal institution) may obtain their required learning experiences.
3. It is to the benefit of the Navy that (name of trainee), enrolled in the professional program at (non-Federal institution) be permitted to participate in training, patient care, or research.
4. Insofar as the (trustees, administrators, etc.) of (non-Federal institution) deem it appropriate and consonant with their institution's programs and policies, (non-Federal institution) will accept (name of trainee) and:
  - a. Permit the trainee to participate in learning experiences at (non-Federal institution).
  - b. Furnish written reports every 6 months evaluating the performance of the trainee. Reports must be directed to the attention of the Commanding Officer, Naval Health Sciences Education and Training Command (HSETC-06), 8901 Wisconsin Avenue, Bethesda, MD 20889-5022.
  - c. Require that materials compiled or published by the trainee relative to the training and experience received at (non-Federal institution) or arising from participation in patient care, must clearly state that the opinions or assertions contained therein are those of the writer and are not to be considered as official or reflecting the views and opinions of the DON or (non-Federal institution).
  - d. Require trainee to dress in a manner agreed upon between the commanding officer of the naval activity, or designated representative, and (non-Federal institution).
5. The Bureau of Naval Personnel will provide competent orders for the Navy trainee who participates in training, patient care, or research at (non-Federal institution).

#### AUTHORITY AND CONTROL

6. It is understood by the parties to this MOU that the participating Medical Department trainee will remain at all times under the military and administrative control of the Navy Reserve Officers' Training Corps Unit, Naval or Marine Corps Reserve Unit, or any other military activity designated by the Chief of Naval Personnel in writing as his representative, and is, therefore, subject to the Uniform Code of Military Justice and other regulations and directives of the Naval service. The Medical Department trainee, while engaged in training or performing services in connection with this MOU, does so within the course and scope of normal employment and duties as an officer of the Medical Department under the authority of lawful military orders. Accordingly, as an employee of the U.S. Navy, the trainee assigned under this MOU must receive all remuneration from the U.S. Navy.

7. It is understood that the training received at (non-Federal institution) will be at no expense to the Government. (With the exception of necessary tuition and certain fees, if applicable, and the pay and allowances to which the trainee is entitled as a commissioned officer of the U.S. Navy.)

8. It is further understood that attendance at professional meetings or courses required by the program director, but not available at (non-Federal institution) as a part of the training, will be at no expense to the Government. In the event that it is the normal policy at (non-Federal institution) that trainees in the same or similar training programs are individually responsible for financing the costs of such meetings or courses, naval trainees may request funding from the Naval Health Sciences Education and Training Command via their administrative reporting senior. Only those meetings or courses required and necessary for the trainee to satisfactorily complete the program will be funded.

9. It is understood and agreed that (non-Federal institution) may generate professional bills for services rendered by military trainees to support the teaching, educational, and research missions of (non-Federal institution). Proceeds from these professional bills will become the exclusive property of (non-Federal institution) and the Government has no right or claim to such proceeds.

#### LIABILITY

10. Medical Department trainees affected by this MOU perform their training under orders issued by the DON and receive their pay and allowances therefrom. To the extent, under the then

relevant facts, trainees would be considered employees of the United States under the laws of the State in which the training is performed, the provisions of Title 10, section 1089(a) will immunize the trainee from individual tort liability. Because the many factual contexts in which tort actions may arise cannot be determined in advance, the application of Title 10, section 1089(a) cannot be forecast absolutely. In the event that the provisions of Title 10, section 1089(a) are found not to apply in a particular case, trainees who are performing services in connection with this MOU and within the scope of their U.S. Navy employment and duties, may be then indemnified by the Secretary of the Navy under the provisions of Title 10, section 1089(f). The (non-Federal institution) agrees to immediately notify the DON of any suits involving the alleged negligence of Navy trainees arising from this MOU. The (non-Federal institution) further agrees to fully cooperate with the U.S. Navy and the Department of Justice in the resolution of any claims or lawsuits involving Navy trainees which arise out of or under the MOU.

11. It is agreed that the military trainee undergoing training will have the same rights and privileges of others in the training program and that educational matters of an adverse nature will be handled to guarantee due process for the military trainee. The point of contact for any military member with substandard training performance or any change in status of the training program is the Commanding Officer, Naval Health Sciences Education and Training Command, 8901 Wisconsin Avenue, Bethesda, MD 20889-5022.

12. It is further understood and agreed that the naval activity, upon notice from the (Trustees, administrators, etc.) of (non-Federal institution) that further participation by a Navy trainee is not desirable, will withdraw such trainee from participation in learning experiences.

#### EFFECTIVE PERIOD

13. This agreement will commence on the date of execution and will continue until the completion of training. The Government will review this agreement once every 3 years, incorporating changes required by statutes, Executive Orders, or regulations. Such changes will be evidenced by a modification to this agreement or by a superseding agreement. If the parties fail to agree on any such change, the agreement may be terminated.

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TERMINATION

14. Termination may be effected by either party by giving 30 days advance written notice of the effective date of termination when deposited in the United States Postal Service mail, and directed to the party to whom notice is being given, at the address set below:

\_\_\_\_\_  
Signature, Date, and Title

\_\_\_\_\_  
Address of Non-Federal  
Institution

\_\_\_\_\_  
Signature, Date, and Title

\_\_\_\_\_  
Address of Naval Activity

SAVINGS ACCRUED/COSTS INCURRED DOCUMENTATION

1. The information requested below is required as a part of the submission requirements for agreements which do not require completion of a DD 1144 (see table 1). This enclosure must be completed, signed by the Medical Department activity participating in the agreement, and attached to the signed agreement submitted to BUMED (MED-311) for record purposes. It will be used for internal taskings and to document the BUMED MOU, Sharing, and Support Agreement Program.
2. Complete blocks 1a-1d (below) using estimates obtained from a simplified economic analysis. Block 1a must reflect the dollar difference between what it costs the supplier to perform the service for the receiver, and what it would cost the receiver to perform the function in-house or under contract. Block 1b must reflect additional costs incurred by either party as a result of the agreement for which reimbursement is not provided. Provide a brief explanation of such costs in the comments section (paragraph 3). Blocks 1c and 1d must indicate the man-years saved or expended as a result of the agreement. Report manpower savings only when actual authorized civilian or military manpower reductions will result. All savings reported are subject to possible audit by the approval authority (see table 1). In the event no savings or costs can be determined, not applicable (N/A) must be reflected for each category.

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SAVINGS ACCRUED/COSTS INCURRED  
MAN-YEARS SAVED/EXPENDED BY THE NAVAL ACTIVITY

---

1a.  
Savings \$ \_\_\_\_\_  
FY \_\_\_\_\_

1b.  
Costs \$ \_\_\_\_\_  
FY \_\_\_\_\_

1c.  
Man-years Saved \_\_\_\_\_  
FY \_\_\_\_\_

1d.  
Man-years Expended \_\_\_\_\_  
FY \_\_\_\_\_

- 
3. (Provide comments, if any (e.g., explanatory or qualifying), regarding figures reflected above).

---

Signature, Date, and Title  
(Insert submitting activity's  
address)